

02/16/00  
JC371 U PTO

Please type a plus sign (+) inside this box +

2-18-00

PTO/SB/05 (4/98)  
Approved for use through 09/30/2000. OMB 0651-0032  
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.	99EC015/75339
First Inventor or Application Identifier	Hymel
Title	ACD MULTIMEDIA CUSTOMER CONTACT ROUTING WITH DELAY ANNOUNCEMENTS
Express Mail Label No.	EL131186152US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents

1.  \*Fee Transmittal Form (e.g. PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
2.  Specification  
(preferred arrangement set forth below)  
  - Descriptive title of the Invention
  - Cross References to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to Microfiche Appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
3.  Drawing(s) (35 U.S.C. 113) Total Sheets 3
4. Oath or Declaration  
Total Pages 2
- a.  Newly executed (original or copy)
- b.  Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 16 completed)
- i.  DELETION OF INVENTOR(S)  
Signed statement attached deleting  
inventor(s) named in the prior application,  
see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).

**NOTE FOR ITEMS 1 & 13:** IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY FEES, A SMALL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT IF ONE FILED IN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).

**ADDRESS TO:**

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

5.  Microfiche Computer Program (Appendices)

6. Nucleotide and/or Amino Acid Sequence Submission  
(if applicable, all necessary)

- a.  Computer Readable Copy
- b.  Paper Copy (identical to computer copy)
- c.  Statement verifying identify of above copies

**ACCOMPANYING APPLICATION PARTS**

7.  Assignment Papers (cover sheet & document(s))
8.  37. C.F.R. § 3.73(b) Statement  Power of Attorney  
(when there is an assignee)
9.  English Translation Document (if applicable)
10.  Information Disclosure Statement (IDS) PTO-1449  Copies of IDS Citations
11.  Preliminary Amendment
12.  Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized) Statement filed in  
Prior application,  
Status still proper  
and desired
13.  \*Small Entity Statement(s)  
(PTO/SB/09-12)0
14.  Certified Copy of Priority Document(s)  
(if foreign priority is claimed)
15.  Other: \_\_\_\_\_

**16. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment**

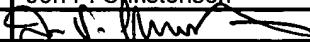
Continuation  Divisional  Continuation-In-Part (CIP) Of prior application No.:

Prior application information: Examiner not yet assigned

Group/Art Unit:

FOR CONTINUATION or DIVISIONAL APPS ONLY: The entire disclosure of the prior application, from which an oath or declarations supplied Under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by Reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**17. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> (Insert Customer No. or attach bar code label here)			or	<input checked="" type="checkbox"/> Correspondence address below
Name	Jon P. Christensen, Esq.				
Address	WELSH & KATZ, LTD. 120 South Riverside Plaza, 22nd Floor				
City	Chicago	State	Illinois	Zip Code	60606
Country	USA	Telephone	(312) 655-1500		Fax (312) 655-1501
Name Print/Type)	Jon P. Christensen	Registration No. (Attorney/Agent)	34,137		
Signature			Date	February 16, 2000	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

A  
jc503 U.S. PTO  
02/16/00

02/16/00